OIPE AUG 08 2006 PATENT & TRADEMARK OFFICE

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	($) 130

Complete if Known	
Application Number	09/914,705
Filing Date	January 28, 2002
First Named Inventor	YAMADA, Haruki
Examiner Name	Robert A. Zeman
Art Unit	1645
Attorney Docket No.	082368-000000US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES Fee ($)	Small Entity Fee ($)	SEARCH FEES Fee ($)	Small Entity Fee ($)	EXAMINATION FEES Fee ($)	Small Entity Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)
_____ -20 or HP =	_____	x _____ =	_____

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee ($)	Fee Paid ($)
_____ -3 or HP =	_____	x _____ =	_____

HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims

Fee ($)	Fee Paid ($)
_____	_____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

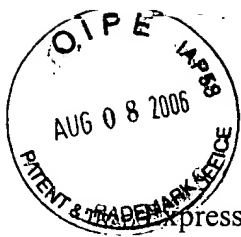| Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
_____ - 100 =	_____ / 50 =	_____ (round up to a whole number)	x _____	= _____

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	_____
Other (e.g., late filing surcharge): Statutory Disclaimer (Terminal Disclaimer)	130

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 50,370	Telephone 650-326-2400
Name (Print/Type)	Neil G. Miyamoto		Date August 8, 2006

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	Confirmation No. 1019
Yamada et al.	Examiner: Robert A. Zeman
Application No.: 09/914,705	Art Unit: 1645
Filed: January 28, 2002	AMENDMENT UNDER 37 CFR 1.111
For: VACCINE PREPARATION CONTAINING FATTY ACID AS A CONSTITUENT	
Customer No.: 20350	

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This reply is filed in response to the Final Office Action mailed March 8, 2006. The original deadline for response was June 8, 2006. A two-month petition for extension of time is enclosed, thus extending the deadline to August 8, 2006. Accordingly, this response is timely filed. A Request for Continued Examination accompanies this response. Please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.